

**Las Vegas Transitional Grant Area Ryan White Part A
Clinical Quality Management Committee Meeting Minutes
June 22, 2021 | 10:00 am – 11:00 am**

Members Present	Provider
Aronca Williams	Aid for AIDS of Nevada (AFAN)
Jennifer Vasquez, Lorianna Angel-Guadron	Access to Healthcare Network (AHN)
Sandra Najuna	AIDS Healthcare Foundation (AHF)
Aaronell Matta	Community Counseling Center (CCC)
Josefa Ozaeta	Community Outreach Medical Center (COMC)
Wilma Herrera / Casey Domingo / Mark Domingo	Dignity Health St. Rose
Gary Costa	Golden Rainbow
Kahlil Dakar	Horizon Ridge Clinic
Karyn Smith	Nye County Health and Human Services
Merylyn Yegon / Stasi Pridgon	Southern Nevada Health District
Christine Baron	University Medical Center (UMC)
Angela Smith	Community Partner
Tony Garcia	LVTGA RWPA
Jessica Rios	LVTGA RWPA
Heather Shoop	LVTGA RWPA
Thomas Rodriguez Schucker	Collaborative Research
Michael Koran	Collaborative Research

Welcome & Introductions

Heather introduced herself, welcomed everyone, expressed her support, and went over housekeeping items.

Jessica introduced herself and shared the purpose of the meeting was to meet, greet, and pulse check on the committee, touch base on how the CQM program is doing, as well as where we are and where we need to be.

Jessica went over the agenda items and added involvement modifications for members to participate online. Tony from RWPA and Lorianna from AHN helped Jessica manage the chat and online member participation.

Members introduced themselves and shared what their favorite personal and/or professional Quality Improvement tool is. Several members expressed how their electronic devices helped them plan and stay on track in both personal and professional aspects of their lives. Other members mentioned the following Quality Improvement tools: CAREWare reports, Excel, client satisfaction surveys, the use of electronic health records system, smart watches, and visiting the dentist to improve the quality of teeth and life.

Stand Up/Sit Down Ice-Breaking Activity

In lieu of poll questions, Jessica engaged the CQM members in this activity to get a sense of who has been in their current role for more than two years, who attended the previous May 2019 CQM meeting, who is familiar with what PDSA and CQM stands for, and to verify who received PCN 15-02 and PCN 16-02. Jessica included fun getting to know you statements to lighten the mood and encourage bonding.

Committee Members participated in a CQM **SWOT Analysis**, a strategic planning tool that encouraged us to reflect on and assess the Strengths, Weaknesses, Opportunities, and Threats of our organization. Subrecipients were given 10 minutes to type in the chat and/or collaborate in person. An analysis of the TGA is included in the notes below.

Strengths:

- We got through 2020!
- Our TGA is at 90% on viral suppression data (above the state of NV 88.8% and above the national average of 88.1%)
- Our RWPA TGA only needs one integrated/ coordinated CQM plan. Providers do not need to submit individual plans.
- We have the resources, capacity, and staff to implement and follow through with the CQM plan and related Quality Improvement activities.
- We are a strengths-based organization that learns and grows together
- We have a strong community working with other agencies
- Good leadership and good collaboration with Community Based Organizations
- CAREWare database
- Empathy & honest care from staff

Weaknesses:

- The current CQM plan is incomplete.
- We did not meet in 2020.
- It is unclear if the previous Performance Measure data was monitored and entered consistently
- Vital CQM players from each agency need to be identified
- Lack of retention
- Gaps in care
- Patient barriers
- Data collection (systems not communicating)
- Red tape bureaucracy
- Lack of different training specifically pertaining to the Ryan White Program

Opportunities:

- We have an opportunity to merge and leverage strengths
- RWPA is available to help build capacity
- We have the opportunity to come to a consensus about our roles, responsibilities, and the development of a new plan and quality improvement projects
- TA from HRSA
- Increase patient engagement
- RW specific community events
- Engaging clients in peer support groups
- Training
- RW field trip to learn what the gaps, barriers, challenges, and successes
- RW field trip to learn about the rural Part A programs

Threats:

- The TGA is not meeting HRSA requirements
- There were two Quality Improvement findings that need attention
- Findings may impact funding

Committee Member Roles & Responsibilities

Jessica provided a copy of the drafted 2021-2022 Annual CQM Plan to each member in person and online. Jessica emphasized the importance needing people, a plan, a process, and the importance of putting it on paper. The team came to a consensus about their roles and responsibilities on the plan.

Jessica went over HAB Performance Measure Data for 2019 and 2020 that illustrated Viral Suppression in 2019 at 87%, and Viral Suppression for 2020 at 90%, ART Prescription was 84% in 2019 and 92% in 2020. Medical Visit Frequency in 2019 was 43% and 33% in 2020. Gap in HIV Medical Visits were 25% and 43% in 2020.

Members were given an opportunity to participate in a general discussion about the meeting and the data presented.

Jessica mentioned agenda items for September's meeting that will include going over PCN 15-02 and PCN 16-02 as well as service utilization, performance measures, goals and objectives. Jessica also mentioned coming together for an interactive team-building activity in the next meeting that will teach Quality Improvement in HIV care.